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CONFIRMATION NO. 5578

<b>SERIAL NUMBER</b> 10/750,545	<b>FILING OR 371(c) DATE</b> 12/31/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 069738-0011	
<b>APPLICANTS</b> Jon D. Kaiser, Mill Valley, CA; <b>** CONTINUING DATA *****</b> <i>none</i> <b>** FOREIGN APPLICATIONS *****</b> <i>none</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 05/03/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after met Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 66	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 41552					
<b>TITLE</b> Nutrient compositions and methods for enhanced effectiveness of the immune system					
<b>FILING FEE RECEIVED</b> 3422	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		